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CONFIRMATION NO. 9034

<b>SERIAL NUMBER</b> 10/027,228	<b>FILING OR 371(c) DATE</b> 12/20/2001 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 32181	
<b>APPLICANTS</b> Kathleen Byrne, Lowell, MA; Maureen Doherty, Lowell, MA;  <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/257,064 12/20/2000  <b>** FOREIGN APPLICATIONS *****</b>  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 01/29/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 29669					
<b>TITLE</b> Intravenous protector wrap with entertainment					
<b>FILING FEE RECEIVED</b> 462	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		